

**BLAND COUNTY SERVICE AUTHORITY
CROSS CONNECTION QUESTIONNAIRE
APRIL 22, 2002**

Name _____

Address _____

Home Telephone _____, Work Telephone _____

Property Owner if not current resident

Name _____

Address _____

Telephone Number _____

Please check any item that may apply to your premises:

- | | |
|---|---|
| <input type="checkbox"/> outside spigots without vacuum breaker | <input type="checkbox"/> swimming pool |
| <input type="checkbox"/> animal watering trough | <input type="checkbox"/> private well |
| <input type="checkbox"/> private spring | <input type="checkbox"/> Jacuzzi / hot tub |
| <input type="checkbox"/> lawn sprinkler system | <input type="checkbox"/> fire protection sprinkler system |
| <input type="checkbox"/> steam or hot water heating system | <input type="checkbox"/> fish pond |
| <input type="checkbox"/> pressure booster pump | <input type="checkbox"/> water storage tank |
| <input type="checkbox"/> water hose with chemical sprayer (garden or lawn fertilizer) | |
| <input type="checkbox"/> pressure washer | |

Please offer a brief description of any other items or treatment units connected to the water system on your property: _____

Please list any existing cross connection control devices you have installed and if they appear to be working properly: _____

Any additional comments: _____

Please return this form to:

**Bland County Service Authority
P.O. Box 28
Bland, Va 24315**